

BIRCH, STEWART, KOLASCH & BIRCH, LLP

INTELLECTUAL PROPERTY LAW
8110 GATEHOUSE ROAD
SUITE 500 EAST
FALLS CHURCH, VA 22042-1210
USA

(703) 205-8000

FAX: (703) 205-8050
(703) 698-8590 (G IV)

e-mail: mailroom@bskb.com
web: <http://www.bskb.com>

CALIFORNIA OFFICES:
COSTA MESA, CALIFORNIA
LOS ANGELES, CALIFORNIA

TERRELL C. BIRCH
RAYMOND C. STEWART
JOSEPH A. KOLASCH
JAMES M. SLATTERY
MICHAEL K. MUTTER
CHARLES GORENSTEIN
GERALD M. MURPHY, JR.
LEONARD R. SVENSSON
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MARC S. WEINER
JOE MCKINNEY MUNCY
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JOHN W. BAILEY
MARK J. NUELLE, PH.D.
JAMES T. ELLER, JR.
D. RICHARD ANDERSON
THOMAS M. SMALL*
ROBERT A. SELDON*
JOHN A. SCILLIERI*
SANFORD ASTOR*

OF COUNSEL:
HERBERT M. BIRCH (1905-1996)
BERNARD L. SWEENEY*
ELLIOT A. GOLDBERG*
WILLIAM L. GATES*
EDWARD H. VALANCE
RUPERT J. BRADY (RET.)*
F. PRINCE BUTLER
FRED S. WHISENHUNT (RET.)
JAMES W. HELLWEGE
QUENTIN R. "Rick" CORRIE
ROBERT F. GNUSE
DAVID R. MURPHY
PHILIP K. YU*

*ADMITTED TO A BAR OTHER THAN VA.

SCOTT L. LOWE
PAUL C. LEWIS
RICHARD J. GALLAGHER
MARYANNE ARMSTRONG, PH.D.
KECIA J. REYNOLDS
KALPANA REDDY
MARK E. OLDS
ESTHER H. CHONG
CATHERINE M. VOISINET
EUGENE T. PEREZ
CAROLYN T. BAUMGARDNER*
JOHN P. KEADY, PH.D.
MARTIN R. GEISSLER*
J. ALISON GRABELL*
T. BENJAMIN SCHROEDER, PH.D.
PERCY L. SQUARE
CLINT A. GARDINE
CRAIG A. McROBBIE

REG. PATENT AGENTS:
FREDERICK R. HANDREN
MAKI HATSUMI
GARTH M. DAHLEN, PH.D.
ROBERT E. GOOZNER, PH.D.
KRISTI L. RUPERT, PH.D.
MATTHEW T. SHANLEY
SUSAN W. GORMAN, PH.D.
ROBERT W. DOWNS
CHAD J. BILLINGS
CHRISTINE V. CASTILLO
CARL T. THOMSEN
SAM BHATTACHARYA



Date: July 22, 2003

Docket No.: 0641-0251P

MS PATENT APPLICATION

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing is the patent application of

Inventor(s): ELLIOT, Andrew James

For: LUMBAR SUPPORT

Enclosed are:

- ☒ A specification consisting of Thirteen (13) pages
- ☒ Three (3) sheet(s) formal drawings
- ☒ An assignment of the invention
- ☐ Applicant claims small entity status under 37 C.F.R. § 1.27
- ☒ Applicant does not claim priority
- ☐ Applicant claims the right of priority under 35 U.S.C. § 119 based on Application No(s). filed in on .
 - ☐ Certified copy(ies) is(are) attached hereto.
 - ☐ Certified copy(ies) will follow.

- ☐ Amend the specification by inserting before the first line thereof the following:
- a. ☐ --This nonprovisional application claims priority under 35 U.S.C. § 119(a) on Patent Application No(s).
filed in _____ on _____, which is(are) herein incorporated by reference.--
- b. ☐ --This nonprovisional application claims priority under 35 U.S.C. § 119(e) on U.S. Provisional Application No(s).
filed on _____, which is(are) herein incorporated by reference.--
- ☒ Executed Declaration (☐ Original ☒ Photocopy)
- ☐ Application Data Sheet in accordance with 37 C.F.R. § 1.76
- ☐ Preliminary Amendment
- ☒ Information Disclosure Statement, PTO-1449 and reference(s)
- ☐ Other:
- ☐ Applicant requests early publication - \$300.00 publication fee
- ☐ Non-publication Request and Certification under 35 U.S.C. § 122(b) (2) (B) (i)

The filing fee has been calculated as shown below:

			LARGE ENTITY	SMALL ENTITY
BASIC FEE			\$750.00	\$375.00
	NUMBER FILED	NUMBER EXTRA	RATE FEE	RATE FEE
TOTAL CLAIMS	13- 20 =	0	X 18 = \$0.00	x 9 = \$0.00
INDEPENDENT CLAIMS	1- 3 =	0	x 84 = \$0.00	x 42 = \$0.00
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS PRESENTED			+ \$280.00	+ \$140.00
TOTAL			\$750.00	\$0.00

- ☒ A check in the amount of \$790.00 to cover the filing fee and recording fee (if applicable) is enclosed.
- ☐ Please charge Deposit Account No. 02-2448 in the amount of \$0.00. A triplicate copy of this transmittal form is enclosed.
- ☒ Please send correspondence to:
BIRCH, STEWART, KOLASCH & BIRCH, LLP or Customer No. 02292
P.O. Box 747
Falls Church, VA 22040-0747
(703) 205-8000

If necessary, the Commissioner is hereby authorized in this, concurrent, and future replies, to charge payment or credit any overpayment to Deposit Account No. 02-2448 for any additional fees required under 37 C.F.R. § 1.16 or under 37 C.F.R. § 1.17; particularly, extension of time fees.

Respectfully submitted,

BIRCH, STEWART, KOLASCH & BIRCH, LLP

By 

Joseph A. Kolasch, #22,463

JAK/jaf
0641-0251P

P.O. Box 747
Falls Church, VA 22040-0747
(703) 205-8000

Attachment(s)

(Rev. 07/14/03)